# 510(k) Summary: Device Modification

as required by 807.92

# 1. Company Identification NOV - 3 2005

KONICA MINOLTA MEDICAL & GRAPHIC, INC. 2970 Ishikawa-machi Hachioji-shi, Tokyo 192-8505, Japan

Tel: +81-426-60-9607 Fax: +81-426-60-9588

## 2. Official Correspondent

Masafumi Saito(Mr.)
Department TS
Advanced Technology Division
R & D Center

### 3. Date of Submission

July 11th, 2005

### 4. Device Trade Name

Direct Digitizer REGIUS MODEL 190

#### 5. Common Name

**Direct Digitizer** 

#### 6. Classification

Medical image digitizers were reviewed by the Radiology Panel and are classified in Class II per 21 CFR 892. 1650.

### 7. Predicate Device

Modified Direct Digitizer REGIUS MODEL 190 is substantially equivalent to our current Direct Digitizer, MODEL 190, 510(k) number: K042386.

# 8. Description of Device

The Direct Digitizer, REGIUS MODEL 190 is an X-ray image reader which uses a stimulable phosphor plate (Plate) as X-ray detector installed in a separate cassette, and reads the image recorded on the Plate by inserting a cassette in the entrance slot of the REGIUS MODEL 190. By means of laser scan and photoelectric method, the device reads the X-ray image data created in form of a latent image on the Plate exposed by an external X-ray generating device, and converts the read data into digital. The signal processing is made to the digital image data such as the digital filtering, the gain-offset correction and the shading collection. Then the REGIUS MODEL 190 is capable of transferring the image data to an externally connected device such as a host computer, an order input device, an image display device, a printer, an image data filing device, and other image reproduction devices.

The modifications are 1) Applicable cassette size is increased. 2) Read-Only cassettes are added, 3) Exposure-Only cassettes are added, and 4) Function of a reader console is upgraded.

The purpose of modification is to enable to use of multiple cassettes to obtain images of long areas of anatomy and then to present the images as a single composite image (Long Length Imaging feature), and to obtain images to verify the position for a radiotherapy location.

#### Long Length Imaging feature

This is suitable for ordinary exposure of the skeletal system such as the whole spine or the whole lower leg, and is used for measurement purposes, such as measurement of skeletal deformation. 14x42in, 14x51in, 11x28in, 10x36in sizes are required for the exposure size, and the exposure is made onto a photostimulable phosphor plate formed by joining a number of photostimulable phosphor plates of regular size.

 Read-Only Cassettes and Exposure-Only Cassettes used for Long Length Imaging feature

Exposure-Only Cassette can not be set to REGIUS MODEL 190, because size does not match.

Read-Only Cassette can be set to REGIUS MODEL 190.

In order to set to REGIUS MODEL 190, the plates are removed from the Exposure-Only Cassette and loaded to Read-Only Cassettes.

When the image is read onto REGIUS MODEL 190, the cassette is fed into the device, the photostimulable phosphor plate contained in the cassette uncovered and the image information recorded on the plate scanned and read out.

REGIUS MODEL 190, using Exposure-Only cassettes that incorporate multiple

plates (joined) for exposure and Read-Only cassettes that incorporate a single plate so that the cassette size is small enough to be accepted by the device, enable image reading similar to ordinary X-ray exposure by replacement of the photostimulable phosphor plates.

### Radiotherapy localization for Linac Graphy

Linac Graphy is used as part of linac (Linear Accelerator) treatment, a kind of radiotherapy (in cases of external radiation radiotherapy).

First of all, design a treatment plan including the irradiation field size and irradiation amount so that the dose to which the patient is exposed during radiotherapy is minimized.

To make a test exposure in order to design the treatment plan, expose the body part positioned as it would be during actual treatment using a CT, etc., and develop the treatment plan based on the information thus obtained.

Then, mark the treatment-target area of the body part that is actually positioned on the treatment table for linac, and, after checking the treatment position using the photo for position verification by linac graphy technology, initiate the treatment.

One method of photographic procedure to produce images used to verify the position is the method using REGIUS MODEL 190, Photostimulable Phosphor Plate and exposure cassette containing metal plate to prevent over exposure problem where all of the exposed images are recorded on the photostimulable phosphor plate exactly as for general X-ray exposures.

 Read-Only Cassettes and Exposure-Only Cassettes used for Radiotherapy localization

When the image is read on REGIUS MODEL 190, the cassette is fed into the device, the photostimulable phosphor plate contained in the cassette uncovered and the image information recorded on the plate scanned and read out.

Because the above mentioned cassette for linac graphy contains a metal plate, it is difficult to feed such a cassette into the device due to its weight that is relatively greater than that of a normal X-ray cassette. Therefore, REGIUS MODEL 190, using Exposure-Only cassettes incorporating a metal plate and Read-Only cassettes with photostimulable phosphor plates processed in the device after exposure, enable image reading identical to ordinary X-ray exposure by replacement of the photostimulable phosphor plate after exposure.

Risk analysis is the same as our current REGIUS MODEL 190, K042386. (We consider no new risk will arise and therefore we did not conduct a new risk analysis.)

Software information is also the same as current REGIUS MODEL 190, K042386.

Labeling (User operation manual) is added to current REGIUS MODEL 190. Additional part of Labeling from the current REGIUS MODEL 190 is attached. For more information, please refer to the attachments.

#### 9. Intended Use

The Direct Digitizer, REGIUS MODEL 190 is an X-ray image reader which uses a stimulable phosphor plate (Plate) as X-ray detector installed in a separate cassette. It reads the image recorded on the Plate and transfers the image data to an externally connected device such as a host computer, an order input device, an image display device, a printer, an image data filing device, and other image reproduction devices.

REGIUS MODEL 190 is used to obtain image data of long areas of anatomy such as the whole spine or the whole lower leg.

REGIUS MODEL 190 is also used to obtain image data to verify the position for a radiotherapy location.

It is designed intended to use in a clinic, a radiology department in a hospital and in other medical facilities.

It is not intended to be used with digital mammography system.

### 10. Substantial Equivalence to Predicate Device

The Direct Digitizer, REGIUS MODEL 190 is substantially equivalent to our current Direct Digitizer REGIUS MODEL190, 510(k) number: K042386. Comparison of the principal characteristics of the two devices is shown in the attachments.

# 11. Compliance standards

The Direct Digitizer, REGIUS MODEL 190 complies with the following standards:

Safety standard :UL60601-1, IEC60601-1
Electromagnetic Compatibility : FCC, IEC60601-1-2
Radiation safety : 21 CFR 1040,10



NOV - 3 2005

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Masafumi Saito Manager, Department TS Konica Minolta Medical & Graphics, Inc. 2970 Ishkawa-cho Hachioji-Shi, Tokyo 192-8505 JAPAN Re: K052095

Trade/Device Name: Direct Digitizer

**REGIUS Model 190** 

Regulation Number: 21 CFR 892.1630 Regulation Name: Electrostatic x-ray imaging system

Regulatory Class: II Product Code: MQB

Dated: September 20, 2005 Received: September 30, 2005

#### Dear Mr. Saito:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter:

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Manay C. brogdon
Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known)

K052095

Device Name

Direct Digitizer, REGIUS Model 190

#### Indications For Use:

The Direct Digitizer, REGIUS MODEL 190 is an X-ray image reader which uses a stimulable phosphor plate (Plate) as X-ray detector installed in a separate cassette. It reads the image recorded on the Plate and transfers the image data to an externally connected device such as a host computer, an order input device, an image display device, a printer, an image data filing device, and other image reproduction devices.

REGIUS MODEL 190 is used to obtain image data of long areas of anatomy such as the whole spine or the whole lower leg.

REGIUS MODEL 190 is also used to obtain image data to verify the position for a radiotherapy location.

It is designed intended to use in a clinic, a radiology department in a hospital and in other medical facilities.

It is not intended for use with digital mammography system.

Prescription Use AND/OR Over-The-Counter Use (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Division of Reproductive, Abdominal,

and Radiological Devices
510(k) Number \_\_\_\_\_/

Page 1 of